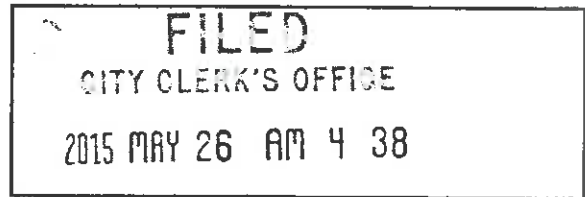


**APPLICATION FOR SPECIAL  
DESIGNATED LICENSE**  
CITY OF LINCOLN CITY CLERK'S OFFICE  
555 S 10<sup>TH</sup> ST  
LINCOLN NE 68508  
PHONE: (402) 441-7438

*June 19  
O.D.*



CITY OF LINCOLN

DO YOU NEED POSTERS? **NEED YES** ☒ **NO** ☒

RETAIL LICENSE HOLDER ☒

NON PROFIT APPLICANT ☐

Non Profit Status (check one that best applies):

Municipal ☐ Political ☐ Fine Arts ☐ Fraternal ☐ Religious ☐ Charitable ☐ Public Service ☐

**COMPLETE ALL QUESTIONS**

- Beer ☒ Wine ☐ Distilled Spirits ☐
- Liquor license number and class (i.e. C55441, CK55441)  
(If you're a nonprofit organization leave blank) **ABK 108500**
- Licensee name (last, first,), corporate name or limited liability company (LLC) name (As it reads on your liquor license)

<b>NAME:</b>	ZIPLINE BREWING CO.		
<b>ADDRESS:</b>	2100 MAGNUM CIRCLE		
<b>CITY:</b>	LINCOLN	<b>ZIP:</b>	68522

- Location where event will be held; name, address, city, county, zip code

<b>BUILDING NAME:</b>	ZIPLINE BREWING CO.		
<b>ADDRESS:</b>	2100 MAGNUM CIR	<b>CITY:</b>	LINCOLN
<b>ZIP:</b>	68522	<b>COUNTY &amp; COUNTY #:</b>	LANCASTER 02

- Is this location within the city/village limits? YES ☒ NO ☐
- Is this location within the 150' of church, school, hospital or home for aged/indigent or for veterans and/or wives? YES ☐ NO ☒
- Is this location within 300' of any university or college campus? YES ☐ NO ☒

5. Date(s) and Time(s) of event (no more than six (6) consecutive days on one application)

Date 6/19/15	Date	Date	Date	Date	Date
Hours From 5 PM	Hours From	Hours From	Hours From	Hours From	Hours From
To 9pm	To	To	To	To	To

a. Alternate date: N/A

b. Alternate location: N/A  
(Alternate date or location must be specified in local approval)

6. Indicate type of activity to be carried on during event:

☐ Dance ☐ Reception ☒ Fund Raiser ☐ Beer Garden ☐ Sampling/Tasting  
Other: \_\_\_\_\_

7. Description of area to be licensed

Inside building, dimensions of area to be covered IN FEET \_\_\_\_\_ x \_\_\_\_\_  
(not square feet or acres)

\*Outdoor area dimensions of area to be covered IN FEET 70' x 72'

\*SKETCH OF OUTDOOR AREA (or attach copy of sketch) (sample sketch)

If outdoor area, how will premises be enclosed?

☐ fence ☒ snow fence ☐ chain link ☐ cattle panel ☐ tent  
other: \_\_\_\_\_

8. How many attendees do you expect at event? 100

9. If over 150 attendees. Indicate the steps that will be taken to prevent underage persons from obtaining alcohol beverages. (Attach separate sheet if needed)

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10. Will premises to be covered by license comply with all Nebraska sanitation laws? YES ☒ NO ☐

a. Are there separate toilets for both men and women? YES ☒ NO ☐

11. Retailer: Will you be purchasing your alcohol from a wholesaler? YES ☐ NO ☒  
Non-Profit: Where will you be purchasing your alcohol?  
Wholesaler ☐ Retailer ☐ Both ☐ BYO ☐  
(includes wineries)

12. Will there be any games of chance operating during the event? YES ☐ NO ☒  
If so, describe activity: \_\_\_\_\_

**NOTE:** Only games of chance approved by the Department of Revenue, Charitable Gaming Division are permitted. All other forms of gambling are prohibited by State Law: There are no exceptions for Non Profit Organizations or any events raising funds for a charity. This is only an application for a Special Designated License under the Liquor Control Act and is not a gambling permit application.

13. Any other information or requests for exemptions (must be received by Commission 30 days prior to event, complete NLCC form 140): \_\_\_\_\_

14. Name and telephone number/cell phone number of immediate supervisor. This person will be at the location of the event when it occurs, able to answer any questions from Commission and/or law enforcement before and during the event, and who will be responsible for ensuring that any applicable laws, ordinances, rules and regulations are adhered to. **PLEASE PRINT LEGIBLY**

Print name of Event Supervisor: Kelly Houchen

Signature of Event Supervisor: \_\_\_\_\_

Event Supervisor phone: Before 4024751001 ext 1 During 4024751001 ext 1

Email address: kelly@ZIPLINEBREWING.COM

**Consent of Authorized Representative/Applicant**

15. I declare that I am the authorized representative of the above named license applicant and that the statements made on this application are true to the best of my knowledge and belief. I also consent to an investigation of my background including all records of every kind including police records. I agree to waive any rights or causes of action against the Nebraska Liquor Control Commission, the Nebraska State Patrol or any other individual releasing said information to the Liquor Control Commission or the Nebraska State Patrol. I further declare that the license applied for will not be used by any other person, group, organization or corporation for profit or not for profit and that the event will be supervised by persons directly responsible to the holder of this Special Designated License.

sign  
here

\_\_\_\_\_  
Authorized Representative/Applicant

OWNER

\_\_\_\_\_  
Title

5/28/15

\_\_\_\_\_  
Date

Tom Wilmoth

\_\_\_\_\_  
Print Name

This individual must be listed on the application as an officer or stockholder unless a letter has been filed appointing an individual as the catering manager allowing them to sign all SDL applications.

The law requires that no special designated license provided for by this section shall be issued by the Commission without the approval of the local governing body. For the purposes of this section, the local governing body shall be the city or village within which the particular place for which the special designated license is requested is located, or if such place is not within the corporate limits of a city or village, then the local governing body shall be the county within which the place for which the special designated license is requested is located.

**SUPPLEMENTAL FORM**  
**REQUIRED FOR ALL OUTDOOR EVENTS**  
*(Including those for Non Profit Organizations)*

Name of Event:	KEGS FOR THE CURE		
Applicant and Sponsoring Organization or Individual (if applicable):		ZIPLINE BREWING CO.	
Date(s) of Event:	6/19/15	Hours:	5-9PM
Alternate Date(s):	N/A	Hours:	N/A

Is the event open to the public? ☒ Yes ☐ No

How will you ensure that minors will not be served or consume beverages containing alcohol: \_\_\_\_\_

ID Check at the door and wristbands. \_\_\_\_\_

Will food be served? ☒ Yes ☐ No If yes, please list food to be served: \_\_\_\_\_

A properly licensed food vendor will be attending to sell food. \_\_\_\_\_

Will non-alcoholic beverages be served: ☒ Yes ☐ No  
If yes, please list non-alcoholic beverages to be served: Root Beer, Water.

Who will serve the beverages containing alcohol? Employees of Zipline Brewing Co. and other properly licensed volunteers  
**Must complete Server/Seller Applicant Information Sheet.**

Have the designated servers received responsible beverage server training? ☒ Yes ☐ No

Will there be a charge for admission? ☒ Yes ☐ No

In the last 12 months, have you received notice of a liquor law violation that occurred during an event at which you were the special designated licensee? ☐ Yes ☒ No If so, explain: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

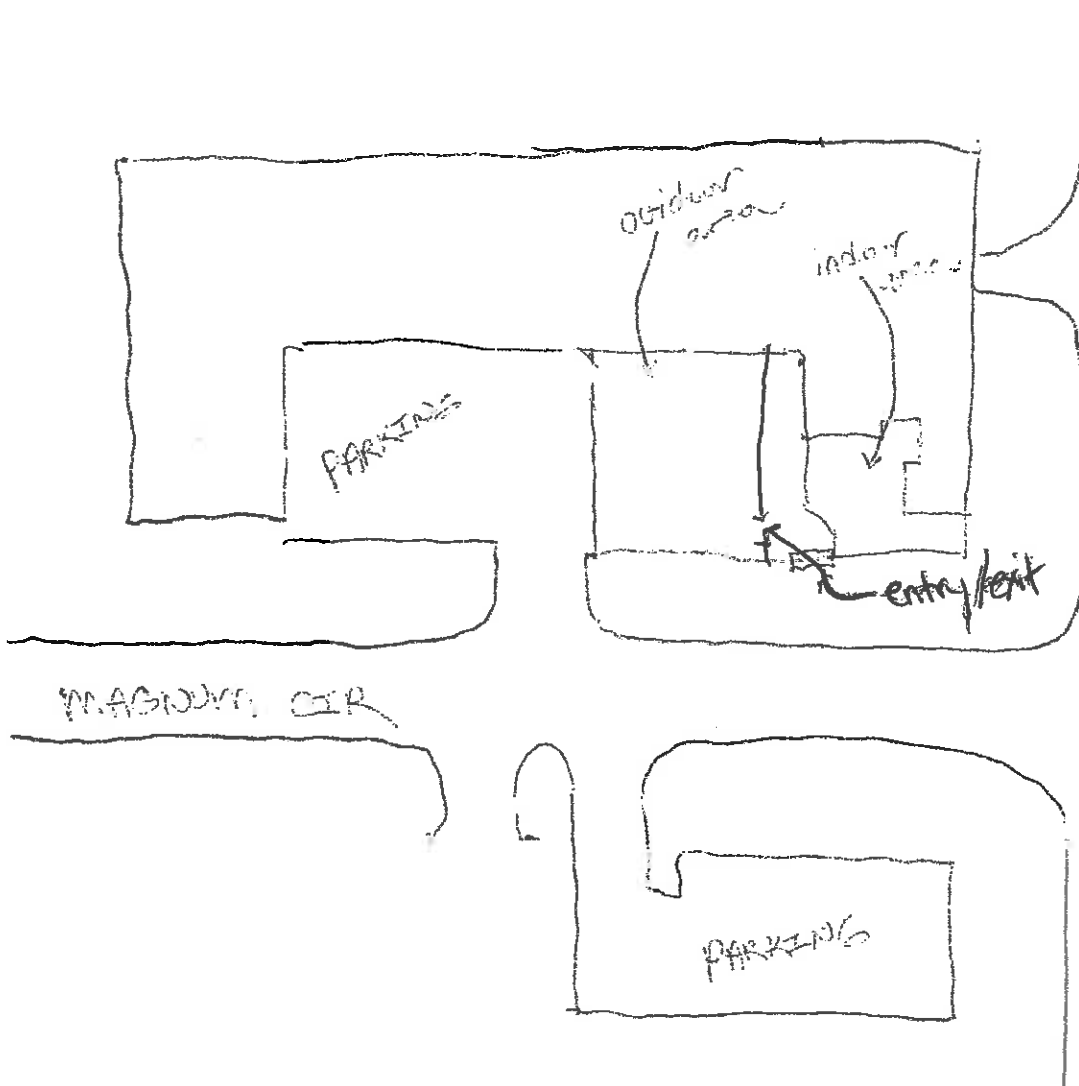
5/26/15

## SITE PLAN INFORMATION REQUIRED FOR ALL OUTDOOR EVENTS

Please provide a drawing showing the following. Provide as much detail as possible to ensure your application is not returned to you for more information. Attach additional drawings, dimensions if necessary.

1. Number of Entry & Exit Points & Dimensions: (3' \_\_\_\_\_ x 3' \_\_\_\_\_)
2. Size & location of tent(s) (heights, width, depth)
3. Size of area being used (70' \_\_\_\_\_ x 72' \_\_\_\_\_)
4. Location & type of cooking equipment (if used)
5. Location of tables & chairs; If stage for band provided & dance area, show location & dimensions on drawing.
6. Height & type of fencing to be used.

**Note: Two (2) exit points must be indicated on your drawing. These exits cannot lead patrons into the building. Questions relating to entry/exit points; electrical wiring; tent sizes can be directed to: Chuck Schweitzer, Fire Prevention Bureau: (402) 441-6441.**



ATTACH EXTRA PAGES IF NECESSARY

**You must provide the NAME and DATE OF BIRTH of ALL Employees/Volunteers who will sell or dispense alcoholic beverages at your event. This applies to nonprofit corporations as well.**

[illegible]

First	Middle	Last	Email	RBST	Certificate #	Expires	CITY	Permit #	Expires	Remove
thomas		wilmoth	tom@ziplinebrewing.com		RB-0000318	2015-12-02		LNK-0010248	2016-01-04	
michael	joseph	boden	mike@ziplinebrewing.com		RB-0006933	2016-03-29		LNK-0014844	2016-03-29	
jason	kyle	sitzman	jason.sitzman@gmail.com		RB-0007671	2016-03-31		LNK-0015400	2016-03-31	
james	w	gallentine	jwg@neb.rr.com		RB-0000546	2015-12-28		LNK-0010453	2016-01-20	
Marcus	A	Powers	marcus@ziplinebrewing.com		RB-0035050	2015-10-11		LNKAM-0035051	2015-10-11	
bryan	jeffrey	lasley	lasley05@hotmail.com		RB-0019346	2016-06-15		LNK-0019500	2016-06-22	
jordan	marie	heiliger	heiligerjm@gmail.com		RB-0021304	2016-08-16		LNK-0021307	2016-08-16	
mckena	enn	ludemann	kena.ludemann@gmail.com		RB-0028743	2017-03-17		LNK-0028744	2017-03-17	
keith	mittchell	gascoigne	keithgascoigne_17@hotmail.com		RB-0005785	2016-03-24		LNK-0013946	2016-03-24	
Christopher	Michael	Hussey	cm.hussey@yahoo.com		RB-0002878	2016-02-27		LNK-0013412	2016-03-19	
kelly		houchen	kallyhouchen@yahoo.com		RB-0005292	2016-03-21		LNK-0013797	2016-03-23	
broderick	james	steffen	brody.steffen@gmail.com		RB-0008609	2016-04-11		LNK-0018571	2016-04-11	
cassandra	may	sitzman	casscronin@hotmail.com		RB-0032394	2017-06-03		LNK-0038736	2017-11-05	
dustin	mattthew	fuhrman	dust.fuhrman@gmail.com		RB-0006653	2016-03-28		LNK-0014615	2016-03-28	
craig	edward	reier	craiger929@gmail.com		RB-0004901	2016-03-19		LNK-0013368	2016-03-19	
megan	marie	mejstrik	Meganmejstrik@gmail.com		RB-0004370	2016-03-14		LNK-0012861	2016-03-14	
marcos gabriel		dieter mussiat	gabriel.mussiat@huskers.unl.edu		RB-0045454	2018-05-13		LNK-0045459	2018-05-13	
melanie	nicole	settle	melanie.settle@gmail.com		RB-0045574	2018-05-15		LNK-0045576	2018-05-15	
Christopher	ira	Vorhies	topher@leonsgourmetgrocer.com		RB-0038534	2017-10-09		LNKAM-0038535	2017-10-09	
eric	douglas	bahn	oldhampalace@yahoo.com		RB-0000350	2015-12-06		LNK-0010118	2015-12-06	
andrew		pitsch	apcooks47@gmail.com		RB-0005898	2016-03-25		LNK-0014006	2016-03-25	
heather	nicole	lundine	hlundine@gmail.com		RB-0000254	2015-11-16		LNK-0010111	2015-12-05	
adam	kent	tiffany	adam@ziplinebrewing.com		RB-0045101	2018-05-08		LNK-0045105	2018-05-08	
jessica	lynn	houchen	jesshouchen@yahoo.com		RB-0040486	2018-01-11		LNK-0040487	2018-01-11	

END RECORDS